

State of South Dakota
Statement of Financial Interest
Elected Official



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JAN 12 2005

S.D. SEC. OF STATE

File statement within 15 days after taking your oath of office in the office where your nominating petition or convention nomination certification was filed. Please read information on reverse side before completing this form.

1. Name JAMIE Boomgarden
2. Address 27348 461 AVE
3. Elected Office House of Representatives District 17

If there is no change in your financial interest since the filing of your postnomination statement of financial interest, please sign and return.

Date: 1-12-05 (Signed) [Signature]

If there are changes, please complete the following:

4. What is your occupation/profession? _____

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

What is the nature of your immediate family's association with each?

State of South Dakota)
County of _____) SS.

Verification

Filed this 16th day of JANUARY 2005
Chris Nelson
SECRETARY OF STATE

I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

(Signed) _____

Sworn to before me this _____ day of _____, 19____.

(Seal)

Officer Administering Oath

State of South Dakota
Statement of Financial Interest
Candidate for Public Office

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FEB 02 2004

S.D. SEC. OF STATE

File statement in the office where your nominating petition or convention nomination certification was filed.

Please read information on reverse side before completing this form.

1. Name Jamie Michael Boomgarden
2. Address 27348 461 AVE , Chancellor SD 57015
3. Office Sought District 17, House of Representatives
4. What is your occupation/profession? Physical Therapist

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

Farm - Cow/calves, alfalfa, ~~corn~~ own + operate

Stock + Mutual fund Trading for personal - self.

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

What is the nature of your immediate family's association with each?

Rental Houses 1/2 owner

State of South Dakota)
County of _____) SS.

Verification

Filed this 2nd day of February, 2004
Chi Nelson
SECRETARY OF STATE

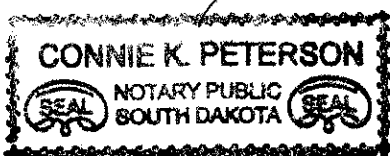
I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

(Signed)

Sworn to before me this 29th day of January, 2004.

(Seal)

Revised 1997



My commission expires:

Connie K. Peterson
Officer Administering Oath

My Commission Expires
May 11, 2004